PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docke: Number

Effective October 1, 2003

10/501520

	1	CLAIMS AS THER DART										-		- U		J
		CLAIMS AS FILED - PART I (Column 1) (Column 2)									ENTITY	1		ОТ	HER '	THAI
	$\ \ $	TOTAL CLAIMS			TCOII	unin 11	(Column 2)		7	TYPE		OF		SMALLE		NTIT
	11,	FOR				750 54 50			┦ ├─	RATE	FE	<u> </u>		RAT		FEI
	\parallel	TOTAL CHARGEABLE CLAIMS			NUME	BER FILED	NUMBER EXTRA		BA	BASIC FEE			OR	BASIC	FEE	<u> </u>
•	INDEPENDENT CLAIMS				1 7	minus 20= *	*		>	XS 9=			ÖR	X\$18	i=	
	II—				7_	minus 3 =			×	(43=			OR	X86=		
		MULTIPLE DEPENDENT CLAIM PE								45=			OR	-290:	_	
I	*.1	If the differ	ence in column	1 is les	s than	zero, enter "()" in column 2		<u> </u>	TAL			OR OR	TOTAL		
I			CLAIMS A	AS AM	MENDED - PART II						 -			OTHE	<u> </u>	
l	_	1	(Column CLAIM		(Column 2) (Column 3)				SMALL ENTITY				P	SMAL		
l	T A		REMAINI	NG		HIGHES NUMBER	R PRESENT SLY EXTRA			[ADDI-		Γ		TA	NDDI-
	MEN		AMENDME			PREVIOUS PAID FOR			RA	.1E	TIONA FEE			RATE		ONA FEE
	AMENDMENT A	Total	*		nus	**			xs	9=		70	R	X\$18=		
ŀ	Ā	Independe			nus	***	=		X43	3=			R	X86=	†	
L		FIRST PRESENTATION OF MULT				PENDENT CL	AIM L		+14	_		10	`` -		1-	
										TAL		OF	`∟	+290=	<u> </u>	
			(Column	41					ADDIT.			JOF	ADA F	TOTAL DIT. FEE	<u></u>	
_	T		CLAIMS			(Column 2 HIGHEST) (Colum	in 3)				•				
MENDMENTR			REMAINING AFTER AMENDMEN	- 1		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	E TIC	DDI- DNAL		F	RATE	TIO	DI- NAL
∑ Q V	ו	otal	*	Minu	s	**	E		XS 9:		EE	OR	1	\$18=	FE	==
	-	naependent		Minu		***	=		 	- -	 		 			
⋖	F	FIRST PRESENTATION OF MU			E DEP	ENDENT CLAI	м		X43=	-		OR:	X	86=		_
												OR	+2	90=		
						•			. TOTA ADDIT. FE	~- 1		or	ADDI	TOTAL T. FEE		
_	_	 	(Column 1)			(Column 2)	(Column	<u>3).</u> .				•				\neg
			REMAINING	.]	- 1	HIGHEST NUMBER	PRESENT		•	AD	DI-	[ADD) -
	_		AFTER AMENDMENT	<u> </u>		PREVIOUSLY PAID FOR	EXTRA	_]	RATE	TION		- 1	RA	TE .	TION. FEE	
	Tot		•	Minus		**	=		X\$ 9=	1		R	X\$1	18=		
			*	Minus			E] f	X43=	 		f	X8			\dashv
T	FIH	IST PRESE	NTATION OF M	ULTIPLE	DEPE	NDENT CLAIM		┨┟		 	°	R		0=		\dashv
H	the	entry in colun	nn 1 is less than ti	Te entry in	Leolumn	2 write 10° in co	luma 3	L	+145=	<u> </u>		R	+29	0=		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													FFF L			
T	he "i	Highest Numb	ber Previously Pai	d For (To	tal or In	dependent) is the	highest numb	ber foun	d in the ap	pcopriate	e box m	colur	na 1.		•	
-		A 200				<u> </u>			•							- (